

Inside TSA

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Expert Answers to 10 Questions about TS



Educating the general public about Tourette Syndrome has been a key mission at TSA for decades, and great progress has been made. More and more people have heard of TS and some have even acquired a deeper understanding of this sometimes confusing neurobiological disorder.

The downside of increasing public awareness is that some individuals with a limited exposure to information believe they know everything about TS. Perhaps these pseudo-experts have seen one TV show on TS and are certain that everyone with TS “curses.” Or they met a straight A student years ago so they are sure that children with TS never need academic accommodations. We’ve asked experts to address the 10 questions that cause the most confusion when discussing TS

with friends, family, neighbors and anyone else outside the TSA family. These argument-ending, authoritative answers will stop the pseudo-experts in their tracks.

Is there a medical test to determine whether someone has TS?

Tourette Syndrome cannot be diagnosed by a blood test or by scans of the brain. While there is strong evidence for hereditary causes of Tourette Syndrome, there is no genetic test available. The condition is common enough and the features are so well known that an experienced physician can determine if a person has TS without needing a special test.

TS is a condition characterized by repetitive involuntary movements (called motor tics) or sounds (called vocal tics). A diagnosis of TS is made if a person has had motor and vocal tics beginning in childhood and lasting for at least one year. A physician makes the diagnosis after getting a detailed history and examining the patient to rule out other less common conditions that might be causing the tics.

People with TS may be able to temporarily suppress a tic, but the movement or sound will eventually occur— either when their attention is shifted, or because

of uncomfortable feelings or urges that are relieved only after performing the tic. This means that an individual with TS really cannot help making the movements or sounds involved with TS symptoms.

— David Shprecher, D.O.
University of Rochester, Department of Neurology

Can TS be diagnosed because of differences seen in the anatomy of the brains of people with TS?

The short answer is ‘no, not at this time.’ However, the TSA continues to support some very promising studies in both neuroimaging and in brain pathology. These may be the fields of study most likely to provide us with information that can lead to a way to confirm TS diagnoses. While there are some intriguing data coming from these investigations, we do not as yet have results that are definitive enough to serve as a reliable diagnostic tool.

In fact, currently there is no specific biological test of any kind that can diagnose TS with assurance — even when we look to genetics and DNA analysis for answers. Disorders such as TS, which have symptoms that are both neurological and behavioral, are highly complex. Scientists agree that to uncover the

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